

ROUTING AND TRANSMITTAL SLIP

Date

11 Sep 84

TO: (Name, office symbol, room number,
Building Agency/Post)

Initials

Date

1.

2.

3.

4.

5.

Action	File	Note and Return
Approval	For Clearance	Per Conversation
As Requested	For Correction	Prepare Reply
Circulate	For Your Information	See Me
Comment	Investigate	Signature
Coordination	Justify	

REMARKS

Agrees with our brackets on
p. 6. Where did you get the
doct.? ^{OTF} and to whom do we
send the sanitized copy? Do
we keep a copy of the BYcom
doct?

DO NOT use this form as a RECORD of approvals, concurrences, disposals,
clearances, and similar actions

FROM: (Name, org. symbol, Agency/Post)

Room No.—Bldg.

C / CRD

Phone No.

5041-102

OPTIONAL FORM 41 (Rev. 7-76)

Prescribed by GSA
FPMR (41 CFR) 101-11.206

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